	***************************************								·····		
SUMMONS FOR DEFENDANT DOCKET NUMBER SUMMONS FOR WITNESS						Trial Court of Massachusetts District Court Department					
SESSION: [SEVE	RITY CODE				NAME A	ND ADDRI	ESS OF CO	URT DIVIS	ION	***************************************	
NAME, ADDRESS AND ZIP CODE OF DEFENDANT						40 I	n Trial Court Broadway n, MA 02780			YOU MUST APPEAR AT THIS COURT ADDRESS ON	
Commonwo	ealth vs				DATE AND Jury Trial March 29), 2012 a	t 08:30 A	М		THE DATE AND TIME SPECIFIED HEREIN	
					DAT	<u> </u>		TIME			
NAME, ADDRESS AND ZIP CODE OF WITNESS KATE CORBETT, C/O STATE LAB INSTITUTE DEPT OF PUBLIC HEALTH 305 south st boston, MA 02130						OFFENSE(S) CONSPIRACY TO VIOLATE DRUG LAW c94C §40, DRUG, POSSESS CLASS C c94C §34, DRUG, POSSESS CLASS E c94C §34, HEROIN, BEING PRESENT WHERE KEPT c94C §35 and HEROIN/MORPHINE/OPIUM, TRAFFICKING IN c94C §32E(c)					
within place of therein NO civil activity activi	by delivering of abode of abode of abode of the control of the con	ng it to the defendat the defendant or ling it to the last king it to the last king it to the last king it to a witness Rule 17(d)(1) of the named Dy ordered to apply ordered to apply to a criminal condence and test described above ordered. You	orthwith serve the ant or witness persuitness with some nown address of the serve Massachusetts I efendant Dear in this Complaint charging on behalf of cove, and to appurare further received.	sonally, or person on the defendence of the defe	by leaving suitable ant or with a person Criminal Person the appearant the Commom time to bring versions and the commom time time to bring versions and the commom time time to bring versions and the commom time time to be common time time time time time time time time	g it at the age and ness. authorize rocedure arance o offense onwealth o time a vith you	e dwelling discretion ed to serv date not (s) listen n D and day	house on then researched above efendar	r usual siding nons in		
	FIRST JUST	ICE		DATE OF	ISSUE		CLERK-N	AGISTRAT	E		
WITNESS:	Hon, Kevi	in J. Cunningham		March	larch 12, 2012			Clause mat			
			RETURN	OF SERV	/ICE						
☐Deliver☐Leavin suitable☐Mailing	ring a copy og a copy of e age and o g a copy of	of it personally to it at the dwelling discretion residing it to the last known nmons on	the defendant or whouse or usual platherein. an address of the defectived	witness. ice of abo	de of the	defendar	nt or witne	ess with a	-	on of	
DATE OF SERVICE		GNATURE OF PERSO	TITLE OF PERSON MAKING SERVICE								

DC-CR-7 (1/84)

SUMMONS FOR DEFENDANT DOCKET NUMBER						Trial Court of Massachusetts					
SUMMONS FOR WITNESS					District Court Department						
SESSION: [SEVE	RITY COL	DE]	·•		NAME AN	ND ADDRESS OF COURT DIVISION					
NAME, ADDRESS AND ZIP CODE OF DEFENDANT						Taunton Trial Court	YOU MUST				
						40 Broadway	THIS COURT				
_			_		D. 4777 4.1	Taunton, MA 02780	ADDRESS ON THE DATE				
Commonwealth vs						ID TIME OF APPEARANCE al	AND TIME SPECIFIED				
					Jury Tri March:	29, 2012 at 08:30 AM	HEREIN				
					DA	ATE TIME					
NAME, ADDRESS	S AND ZIP	CODE OF WITNESS			OFFENSE(S)						
}		C/O STATE LAB	INSITUTE		CONSPIRACY TO VIOLATE DRUG LAW c94C §40, DRUG,						
DEPT OF PUBLIC HEALTH 305 south st						POSSESS CLASS C c94C §34, DRUG, POSSESS CLASS E c94C §34, HEROIN, BEING PRESENT WHERE KEPT c94C §35 and HEROIN/MORPHINE/OPIUM, TRAFFICKING IN c94C §32E(c)					
	w										
To the above named											
WITNESS:	FIRST JUSTICE			DATE OF	ISSUE	CLERK-MAGISTRATE	i .				
***************************************	Hon. Kevan J. Cunningham			March	12, 20 ²	12 Claudei M	Claudi Mat-				
		Failure to appear in a warrant for you	our arrest. Please	nis summo bring this NCION: ción offic	ons may docume ial de la	result in the issuance of ent with you to court. corte.					
DATE OF SERVICE		SIGNATURE OF PERS	ON MAKING SERVICE			TITLE OF PERSON MAKING SERVICE					

DC-CR-7 (1/84)